

**Inventory / CCP Tracking Report**

Printed By : Data Ops  
 Printed Date : 4/18/2007

Facility : **FA0029134** **FRED R RIPPY INC** Phone : 562-698-9801  
 City Code: **WHIT** 12471 E WASHINGTON BLVD WHITTIER **90602**  
 Owner : OW0029134 CareOf: CAROL CASTILLO Work Phone : 562-698-9801  
 FRANCINE H RIPPY DBA: FRED R RIPPY INC Home Phone : Not Specified  
 12471 E WASHINGTON BLVD  
 WHITTIER CA 90602

Cert Mail : Dunn / Brad : 008277394

SIC : 3469 Metal stampings, nec

Program Element : 3001 HM HANDLER, FEE GROUP 01  
 01

Previous Record : TBA

District : SOUTHEAST Station : 028

**Inventory Tracking Milestones****Date Completed****To Do Next****Inventory****\* Current Status**

Report Year 2006 4/18/2007

Package Sent Date

Package Received Date 1/31/2007

Correction Notice Sent Date

Correction Received Date

Note FRANCINE H. RIPPY, OWNER, 01/26/07

**Forward to District  
Office**

**CCP Tracking Milestones****CCP****\* Current Status**

Report Year 2006

Package Received Date 01/31/2007

Correction Notice Sent Date

Correction Received Date

Site Map Filing Date

Cal-ARP section --

RS : No

RECEIVED

SEP 4 2007

PARAMOUNT



**LOS ANGELES COUNTY FIRE DEPARTMENT**  
**HEALTH HAZARDOUS MATERIALS DIVISION**  
5825 Rickenbacker Road, Commerce, CA 90040

**HAZARDOUS MATERIALS STATE REPORTING PACKET**

Enclosed is your latest Hazardous Materials Inventory Statement. Please carefully review it for accuracy. The requirements for submitting a Consolidated Contingency Plan have changed (**see Page 1**). If you require assistance in processing these forms, please contact the Data Operations Unit at (323) 890-4000, Monday through Friday, 9:00 A.M. to 4:00 P.M., or the web site: <http://www.lacofd.org/HealthHazMat/HHMDForms.asp>

*The Department recommends use of CERTIFIED MAIL to ensure delivery of these forms before the December 31<sup>st</sup> deadline to avoid late fees. Sign and date the Annual Certification section below and keep a copy of the entire package for your records.*

**RE-CERTIFICATION PROCEDURE**

*Please check the appropriate box(es).*

- ☐ **Delete:** Write "delete" next to any discontinued hazardous materials on the attached Inventory Statement.
- ☐ **Add:** If you are handling materials not previously disclosed **Make copies of the Chemical Description Form and complete all information required** (one form per chemical).
- ☐ **Revise/Update:** Cross out any errors on the Inventory Statement and **Clearly Print** the correct information.
- ☒ **No Change:** There has been no change in the quantity of any hazardous material as reported.
- ☐ **Consolidated Contingency Plan:** The web link above connects to the UP Forms: Click the Consolidated Contingency Plan.
- ☒ **No Change:** Mark this Box if the Consolidated Contingency Plan on file is correct and complete.
- ☐ **Regulated Substance Registration:** If you are handling a Regulated Substance not previously disclosed, you must also complete the Registration Substance Registration form. Complete only if substance is at or above the Threshold Quantity (TQ). Refer to the list of regulated substances and the respective TQ.

**THE SUBMITTAL OF THE HAZARDOUS MATERIALS STATE REPORTING FORMS CONTAINS ALL OF THE REQUIRED STATE AND FEDERAL INVENTORY INFORMATION AND SATISFIES THE REQUIREMENTS OF BOTH STATE AND FEDERAL REGULATIONS.**

**ANNUAL CERTIFICATION**

I certify under penalty of law that I have personally examined the information submitted herein is complete, accurate and up to date. Also, no hazardous materials subject to the inventory requirements of Chapter 6.95 of the Health and Safety Code are being handled that are not listed on the most recently submitted annual inventory form.

FA00291341  
FRED R RIPPY INC  
12471 E WASHINGTON BLVD  
WHITTIER, CA 90602  
ATTN: FRANCINE H. RIPPY

028

**FRANCINE RIPPY**

Print Name of Owner/Operator

12471 E. WASHINGTON BLVD.

Facility/Site Address

*Francine Rippy*  
Signature of Owner/Operator

JAN 31 2007

Date

## OWNER FILE INFORMATION

Please clearly make changes/corrections.

Owner ID: OW0029134  
Owner Name: FRANCINE H RIPPY  
Owner DBA: FRED R RIPPY INC  
Owner Address: 12471 E WASHINGTON BLVD  
WHITTIER, CA 90602  
Work/Business Phone: 562-698-9801  
Billing/Mailing Address: 12471 E WASHINGTON BLVD  
WHITTIER, CA 90602  
ATTN/Care of: CAROL CASTILLO

Dvr Lic No: \_\_\_\_\_ State: \_\_\_\_\_  
Tax ID : 95-2041097  
Owner Date of Birth: \_\_\_\_\_

## FACILITY FILE INFORMATION

On Site Regulated Substances : Yes \_\_\_ No \_\_\_

Facility ID: FA0029134  
Facility Name: FRED R RIPPY INC  
Site Location: 12471 E WASHINGTON BLVD  
WHITTIER, CA 90602  
Phone: 562-698-9801  
Mailing Address: 12471 E WASHINGTON BLVD  
WHITTIER, CA 90602  
Operator/Care of: FRANCINE H. RIPPY  
SIC Code: 3469  
Operating Hours: Days: M-F Hours: 6:30-3:00  
Station: 028  
E-Mail Address: \_\_\_\_\_  
Nature of Business: MANUFACTURING

Date First Became Operational: \_\_\_\_\_

## ENVIRONMENTAL CONTACT INFORMATION

Contact Name: ~~BRYAN VIC~~ Carol Castillo ✓ Phone: 562-698-9801  
12471 E WASHINGTON BLVD  
WHITTIER CA 90602

Dun &amp; Bradst.: 00-827-7394

## EMERGENCY CONTACT INFORMATION

## PRIMARY CONTACT:

## SECONDARY CONTACT:

Name : ~~BRYAN VIC~~ JOHN BONDY ✓ FRANCINE RIPPY  
Title : GENERAL MANAGER CFO ✓ OWNER  
Business Phone : 562-698-9801 562-698-9801  
24 - Hour Phone : Exemption 6: Privacy  
Pager # : ~~562-900-8934~~ Not Specified

## ADDITIONAL INFORMATION

H 29-Jan-04

ASSESSORS PARCEL NUMBER \_\_\_\_\_

4

Certification: I certify under penalty of law that I have personally examined and am familiar with the information submitted in this inventory and believe the information is true, accurate and complete.

Print Name of Document Preparer: YURI STRAUSS

Signature of Owner/Operator: Francine H Rippy

Date: 1/26/07

# Hazardous Materials Inventory Statement

Date: 11/21/06

Report #5316

Run By:

Business Name: **FRED R RIPPY INC**

(Same as Facility Name or DBA)

12471 E WASHINGTON BLVD

WHITTIER

Last Reporting Date: 01/24/06

Page 1 of 1

Chemical Location:

Unit # 2

(Building/Storage Area)

**FIXED CONTAINERS AT SITE**

Facility ID #:

**FA0029134**

1	2	3	4	5	6	7	8	9							
Haz. Class	Grid Coordinate	Hazardous Components (For mixture only)	Trade Secret	Chemical Name	% Weight	EHS	CAS #	Type and Physical State	Quantities	Storage Codes	Hazard Categories				
		Common Name							Max Daily	Average Daily	Largest Cont.	Units	Storage Pressure	Storage Temp.	
SAF WAY LUBE		SOLVENT-REFINED LIGHT NAPHTHENIC DISTILLATE MINERAL OIL		64741-97-5	M				55	30	55.00	A	A	A	Y fire
Sub - Location	BACK OF SHOP NW CRNR			8012-95-1	M: Mix P: Pure W: Waste							A: Gallons B: Cu. Feet C: Pounds D: Tons Waste Code: 221	A: Ambient B: Ambient C: Ambient D: Cryogenic Amt: 15.0		reactive presure rels. acute health chronic radioactive
If EPCRA, sign:					L			L: Liquid S: Solid G: Gas	Curies: (If radioactive)	Days On Site:	Storage Container:*				
HZ0026292	RS: N	CAS #									365	D			
PROPANE					P				120	80	40.00	B	A	A	Y fire
Sub - Location	NE CRNR OF WHSE	Components Not Necessary for Pure Chemical			M: Mix P: Pure W: Waste							A: Gallons B: Cu. Feet C: Pounds D: Tons Waste Code:	A: Ambient B: Ambient C: Ambient D: Cryogenic Amt:		reactive presure rels. acute health chronic heal. radioactive
If EPCRA, sign:					G			L: Liquid S: Solid G: Gas	Curies: (If radioactive)	Days On Site:	Storage Container:*				
HZ0085746	RS: N	CAS #	74-98-6								365	L			
ACCUSTAMP VANISHING OIL		NAPHTHA: STODDARD SOLVENT SOLVENT-REFINED LIGHT NAPHTHENIC DISTILLATE MINERAL OIL		8052-41-3	M				165	110	55.00	A	A	A	Y fire
Sub - Location	NW CRNR OF SHOP			64741-97-5	M: Mix P: Pure W: Waste							A: Gallons B: Cu. Feet C: Pounds D: Tons Waste Code:	A: Ambient B: Ambient C: Ambient D: Cryogenic Amt:		reactive presure rels. acute health chronic heal. radioactive
If EPCRA, sign:				8012-95-1				L	Curies: (If radioactive)	Days On Site:	Storage Container:*				
HZ0026293	RS: N	CAS #						L: Liquid S: Solid G: Gas			365	D			
ACETYLENE					P				111	111	111.00	B	B	A	Y fire
Sub - Location	SW CRNR OF WHSE	Components Not Necessary for Pure Chemical			M: Mix P: Pure W: Waste							A: Gallons B: Cu. Feet C: Pounds D: Tons Waste Code:	A: Ambient B: Ambient C: Ambient D: Cryogenic Amt:		reactive presure rels. acute health chronic heal. radioactive
If EPCRA, sign:					L			L: Liquid S: Solid G: Gas	Curies: (If radioactive)	Days On Site:	Storage Container:*				
HZ0026294	RS: N	CAS #	74-86-2								365	L			
OXYGEN					P				154	154	154.00	B	B	A	Y fire
Sub - Location	SW CRNR OF WHSE	Components Not Necessary for Pure Chemical			M: Mix P: Pure W: Waste							A: Gallons B: Cu. Feet C: Pounds D: Tons Waste Code:	A: Ambient B: Ambient C: Ambient D: Cryogenic Amt:		reactive presure rels. acute health chronic heal. radioactive
If EPCRA, sign:					G			L: Liquid S: Solid G: Gas	Curies: (If radioactive)	Days On Site:	Storage Container:*				
HZ0026291	RS: N	CAS #	7782-44-7								365	L			

*Components Not Necessary  
for Pure Chemical*

*Components Not Necessary  
for Pure Chemical*

*Components Not Necessary  
for Pure Chemical*

* Code	Storage Type	Code	Storage Type	Code	Storage Type	Code	Storage Type	Code	Storage Type	Code	Storage Type
A	Aboveground Tank	D	Steel Drum	G	Carboy	J	Bag	M	Glass Bottle or Jug	P	Tank Wagon
B	Belowground Tank	E	Plastic/Non-metallic Drum	H	Silo	K	Box	N	Plastic Bottle or Jug	Q	Rail Car
C	Tank Inside Building	F	Can	I	Fiber Drum	L	Cylinder	O	Tote Bin	R	Other

# UNIFIED PROGRAM (UP) FORM

## BUSINESS OWNER/OPERATOR IDENTIFICATION (LACoCUPA Form 2730)

☐ NEW BUSINESS ☐ OUT OF BUSINESS ☒ REVISE/UPDATE (EFFECTIVE 01/01/2007)

PAGE 1 OF 2

### I. IDENTIFICATION

FACILITY ID#	F	A	0	0	2	9	1	3	4	1	BEGINNING DATE 2007/01/01	100	ENDING DATE 2007/12/31	101	
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As) FRED R. RIPPY, INC.												3	BUSINESS PHONE 562-698-9801		102
BUSINESS SITE ADDRESS 12471 E. WASHINGTON BLVD.															103
CITY WHITTIER										104	CA	ZIP CODE 90602		105	
DUN & BRADSTREET 008277394										106	SIC CODE (4 digit #) 3469		107		
COUNTY LOS ANGELES										108	UNINCORPORATED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		133a		
BUSINESS OPERATOR NAME FRANCINE H. RIPPY										109	BUSINESS OPERATOR PHONE 562-698-9801		110		

### II. BUSINESS OWNER

OWNER NAME FRANCINE H. RIPPY	111	OWNER PHONE 562-698-9801		112	
OWNER MAILING ADDRESS 12471 E. WASHINGTON BLVD.					113
CITY WHITTIER	114	STATE CA	115	ZIP CODE 90602	116

### III. ENVIRONMENTAL CONTACT

CONTACT NAME CAROL CASTILLO	117	CONTACT PHONE 562-698-9801		118	
CONTACT MAILING ADDRESS 12471 E. WASHINGTON BLVD.					119
CITY WHITTIER	120	STATE CA	121	ZIP CODE 90602	122

### IV. EMERGENCY CONTACTS

PRIMARY		SECONDARY	
NAME JOHN E. BOND	123	NAME FRANCINE H. RIPPY	128
TITLE CFO	124	TITLE OWNER	129
BUSINESS PHONE 562-698-9801	125	BUSINESS PHONE 562-698-9801	130
24-HOUR PHONE 562-900-9186	126	24-HOUR PHONE 626-333-3614	131
PAGER #	127	PAGER #	132
E-MAIL ADDRESS (if any)	133b	E-MAIL ADDRESS (if any)	133b

### V. ADDITIONAL LOCALLY COLLECTED INFORMATION

FEDERAL TAX IDENTIFICATION NUMBER 95-2041097	
NAME, POSITION, AND DATE OF BIRTH FRANCINE H. RIPPY, OWNER, 10-17-38	
DRIVER'S LICENSE NUMBER AND STATE	

### MAILING/ BILLING INFORMATION

ADDRESS 12471 E. WASHINGTON BLVD.	133d	CITY WHITTIER	133e	STATE CA	133f	ZIP CODE 90602	133g
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Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE <i>Francine H. Rippy</i>	DATE 1/25/07	NAME OF DOCUMENT PREPARER YURI E. STRAUSS
NAME OF SIGNER (print) FRANCINE H. RIPPY	TITLE OF SIGNER CEO	

OFFICIAL USE ONLY	UP Form	HW	HM	ARP	APST	UST	TP	CUPA	PA
INSPECTOR	DISTRICT	DATE OF INSP.		DIVISION		BATTALION		STATION	

The site plan shows a property bounded by Washington Blvd to the south and several alleys to the north and west. The property contains two parking lots, several buildings, and a drive-through area. A layout legend is provided for reference.

**LAYOUT LEGEND**

- AREA STORAGE LOCATION
- DISSEMINATION/STAGING AREA
- HIGHWAY/STREET/STAIRWAY/AND
- ▽ FIRE HYDRANTS
- ✕ FIRE EXTINGUISHERS
- ⊙ CENTRAL PUMP
- ⊙ GAS OIL-OFF
- ⊙ WATER OIL-OFF

**Handwritten Notes:**

- City Code
- Whit

- 

City Code  
Whit

RECEIVED  
JAN 31 2007  
HHMD - DATA OPS

OFFICIAL USE ONLY		DATE RECEIVED			REVIEWED BY	
IV	BN	STA	OTHER	DISTRICT	CUPA	PA

To be Xeroxed

# Unified Program (UP) Form CONSOLIDATED CONTINGENCY PLAN

## SITE MAP

A site plan and storage map must be included with your Contingency Plan. For relatively small facilities, these documents may be combined into one drawing. Since these drawings are intended for use in emergency response situations, larger facilities (*generally those with complex and/or multiple buildings*) should provide an overall site plan and a separate storage map for each building/storage area. A blank Facility Site Map has been provided on the reverse side of this page. You may complete that page or attach any other drawing(s) which contain(s) the information required below.

**1. Site Plan:** This drawing shall contain, at a minimum, the following information:

- a. Site Orientation (north, south, etc.);
- b. Approximate scale (e.g. "1 inch = 10 feet");
- c. Date the map was drawn;
- d. Locations of all buildings and other structures;
- e. Parking lots and internal roads;
- f. Hazardous materials loading/unloading areas;
- g. Outside hazardous materials storage or use areas;
- h. Storm drain and sanitary sewer drain inlets;
- i. Wells for monitoring of underground tank systems;
- j. Primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas;
- k. Adjacent property use;
- l. Locations and names of adjacent streets and alleys;
- m. Access and egress points and roads.

**2. Storage Map(s):** The map(s) shall contain, at a minimum, the following information:

- a. General purpose of each section/area within each building (e.g. "Office Area", "Manufacturing Area", etc.);
- b. Location of each hazardous material/waste storage, dispensing, use, or handling area (e.g. *individual underground tanks, aboveground tanks, storage rooms, paint booths, etc.*). Each area shall be identified by a unique location code number, letter, or name (e.g. "1", "2", "3", "A", "B", "C", etc.);
- c. Entrances to and exits from each building and hazardous material/waste room/area;
- d. Location of each utility emergency shut-off point (i.e. gas, water, electric.);
- e. Location of each monitoring system control panel (e.g. *underground tank monitoring, toxic gas monitoring, etc.*).

**3. Map Legend**

Item and/or Description	Location Code (LC)
MSDS STORAGE LOCATION	MSDS
EVACUATION/STAGING AREA	E / S
HAZARDOUS MATERIAL STORAGE/HANDLING AREA	HMS
FIRE HYDRANTS	Y
FIRE EXTINGUISHERS	)-----(
ELECTRICAL PANEL	(E)
GAS SHUT OFF	(G)
WATER SHUT OFF	(W)